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0010/PTO
Rev. 6/95

U.S. Department of Commerce
Patent and Trademark Office

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing

Attorney Docket Number

H 2635 PCT/US

First Named Inventor

Cortekar, Hans-Wolfgang

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FOAMING SHAVING CREAM

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 01/29/1998 as United States Application Number or PCT International

Application Number PCT/EP98/00472 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
197 04 635.5	Germany	02/07/1997	<input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

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DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP98/00472	01/29/1998	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label

OR

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Ernest G. Szoke	22,135	Glenn E. J. Murphy	33,539
Wayne C. Jaeschke	21,062	Stephen D. Harper	33,243
John E. Drach	32,891		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☐ Customer Number or label OR ☒ Fill in correspondence address below

Name	<u>Glenn E. J. Murphy</u>		
Address	<u>Henkel Corporation - Patent Department</u>		
Address	<u>2500 Renaissance Boulevard, Suite 200</u>		
City	<u>Gulph Mills</u>	State	<u>PA</u>
ZIP	<u>19406</u>		
Country	<u>USA</u>	Telephone	<u>610-278-4926</u>
Fax	<u>610-278-6548</u>		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned

Given Name	<u>Hans-Wolfgang</u>	Middle Initial		Family Name	<u>Cortekar</u>	Suffix e.g. Jr.	
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Inventor's Signature	<u>X Hans-Wolfgang Cortekar</u>	Date	<u>06-28-1999</u>
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Residence City	<u>Remscheid</u>	State		Country	<u>Germany</u>	Citizenship	<u>Germany</u>
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Post Office Address	<u>Fichtenstr. 39</u>
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Post Office Address	
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City	<u>42855 Remscheid</u>	State		Zip		Country	<u>Germany</u>	Applicant Authority	
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☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box ☐

H 2635 PCT/US

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

2-00
Given Name Wolfhard Middle Initial Family Name Scholz Suffix e.g. Jr.

Inventor's Signature X [Signature] Date 06-28-1999

Residence: City Krefeld State Country Germany DEX Citizenship Germany

Post Office Address Edmundstr. 26Post Office Address

City 47829 Krefeld State Zip Country Germany Applicant Authority

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name Middle Initial Family Name Suffix e.g. Jr.

Inventor's Signature Date

Residence: City State Country Citizenship

Post Office Address Post Office Address

City State Zip Country Applicant Authority

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name Middle Initial Family Name Suffix e.g. Jr.

Inventor's Signature Date

Residence: City State Country Citizenship

Post Office Address Post Office Address

City State Zip Country Applicant Authority

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name Middle Initial Family Name Suffix e.g. Jr.

Inventor's Signature Date

Residence: City State Country Citizenship

Post Office Address Post Office Address

City State Zip Country Applicant Authority

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

A/D581-40

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PATENTS ONLYDOCKET: H 2635 PCT/US
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Patent and Trademark OfficeTo the Honorable Commissioner of Patents and Trademarks: Please record the
attached original documents or copy thereof:

1. Name of conveying party(ies): Hans-Wolfgang Cortekar and Wolfhard Scholz Additional names(s) or conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party (ies): Name: <u>Henkel Kommanditgesellschaft auf Aktien (Henkel KGaA)</u> Internal Address: _____ Street Address: <u>TFP/Patentabteilung</u> City: <u>Duesseldorf</u> State <u>GER</u> Zip <u>D-40191</u> Additional name(s) & addresses attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Nature of Conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security <input type="checkbox"/> Change of Name <input type="checkbox"/> Agreement <input type="checkbox"/> Other Execution Date: <u>June 28, 1999</u>	

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: August 6, 1999

A. Patent application No. (s)

B. Patent No (s).

Additional numbers attached? ☐ Yes ☒ No

5. Name and Address of party to whom correspondence concerning document should be mailed: Name: <u>Henkel Corporation</u> Internal Address: <u>Law Department</u> Attention: <u>Glenn E. J. Murphy</u> Street Address: <u>2500 Renaissance Blvd -Suite 200</u> City <u>Gulph Mills</u> State <u>Pa</u> ZIP <u>19406</u>	6. Total number of applications and patents involved: <u>[1]</u> 7. Total fee (37 CFR 3.41).....\$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: <u>01-1250 (Order No. 99-0965)</u>
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9. Statement and signature:

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Thomas F. Roland (Reg. No. 42,110)
Name of Person Signing

Signature

Date

Total Number of pages including cover sheet, attachments and document: [3]

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